

Exhibit 8

FEDEX COMPLETES THIS SECTION:

| | | | |
|---|--|--|--|
| DRIVER'S NAME (Last, First, Middle) <i>Thornton, Charlie</i> | | SOCIAL SECURITY NUMBER <i>424-80-8879</i> | TERMINAL NAME AND NUMBER <i>QMTG 3361</i> |
| CONTRACTOR (CORPORATION) NAME (if not same as driver) | | CONTRACTOR'S SOC. SEC. AND/OR CORPORATION I.D. NUMBER | |
| STATUS (Check One) | | | |
| <input checked="" type="checkbox"/> REGULAR CONTRACTOR | | <input type="checkbox"/> REGULAR LH CONTRACTOR'S DRIVER | |
| <input type="checkbox"/> P&D TEMPORARY DRIVER | | <input type="checkbox"/> REGULAR P&D CONTRACTOR'S DRIVER (2ND VAN, ETC.) | |
| <input type="checkbox"/> YARD SWITCHER | | <input type="checkbox"/> MANAGEMENT DRIVER | |
| TYPE OF OPERATION (Check One) | | TYPE OF EQUIPMENT (Check One) | |
| <input checked="" type="checkbox"/> P&D <input type="checkbox"/> LH | | <input checked="" type="checkbox"/> VAN <input type="checkbox"/> STRAIGHT TRUCK <input type="checkbox"/> TRACTOR TRAILER | |

FALSIFICATION OF THIS FORM WILL RESULT IN DRIVER DISQUALIFICATION AND/OR CONTRACT TERMINATION

In accordance with Part 391.27 of the Motor Carrier Safety Regulations, each individual operating a commercial motor vehicle is required at least once every twelve (12) months to prepare and furnish the motor carrier with a list of all violations of motor vehicle traffic laws and ordinances (other than violations involving parking) of which the driver has been convicted or on which he has forfeited bond or collateral during the preceding twelve (12) months, involving commercial and personal driving. List any loss of driving license, permit or privilege to operate a motor vehicle, either temporarily or permanently, by reason of revocation, suspension, withdrawal or denial.

DRIVER COMPLETES THIS SECTION:

SEE REVERSE (If Applicable)

Instructions:

- If one or more such violation has occurred in the past twelve (12) months, you must itemize them in Section (A) below.
- If no such violation has occurred in the past twelve (12) months, you must so certify by placing an "X" in the appropriate block in Section (B) below.
- Complete in full, Section (C) below.

A. I hereby certify that the following is a true and complete list of all traffic violations (other than parking violations), which have occurred in any driving capacity for which I have been convicted or forfeited bond or collateral during the previous twelve (12) months. (Use back side if additional space is needed.)

| DATE OF CONVICTION | OFFENSE | LOCATION (City/State) | TYPE OF VEHICLE | |
|--------------------|-------------|-----------------------|-----------------|---------|
| | | | COMMERCIAL | PRIVATE |
| | <i>None</i> | | | |
| | | | | |
| | | | | |
| | | | | |

B. ☒ I hereby certify that I have not been convicted nor forfeited bond as collateral because of any violations occurring in the past twelve (12) months as outlined above.

C.

| | | | |
|---|--|------------------------|---|
| DRIVER'S LICENSE NUMBER <i>3514669</i> | STATE ISSUED <i>AL</i> | TYPE CLASS <i>D</i> | DATE OF EXPIRATION <i>12-27-2008</i> |
| TODAY'S DATE <i>1-14-09</i> | DRIVER'S SIGNATURE <i>[Signature]</i> | | |

FOR FEDEX USE ONLY:

I hereby certify that I have reviewed the above driver's D.O.T. qualification file and the above certification of motor violations in accordance with Parts 391.5 and 391.25 of the Motor Carrier Safety Regulations and have found that this driver meets the minimum requirements for safe driving except as noted below:

| | | |
|--|--------------------------|------------------------|
| FXG 0000-13 | | |
| TERMINAL MANAGER'S SIGNATURE <i>[Signature]</i> | TITLE <i>Jr. Mgr.</i> | DATE <i>1/14/09</i> |

NOTE: CDL LICENSED DRIVERS MUST COMPLETE THE REVERSE SIDE OF THIS FORM.